

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N1300002513

Entity Name: COLOMBO AMERICAN MEDICAL ASSOCIATION, INC.

FILED
Apr 09, 2017
Secretary of State
CC2745087203

Current Principal Place of Business:

2761 RUNYON CIRCLE
ORLANDO, FL 32837

Current Mailing Address:

15502 STONEYBROOK WEST PKWY
STE #104 PMB 229
WINTER GARDEN, FL 34787

FEI Number: 46-2284261

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PEREZ, ANDRES
2761 RUNYON CIRCLE
ORLANDO, FL 32837 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name PEREZ, ANDRES
Address 2761 RUNYON CIRCLE
City-State-Zip: ORLANDO FL 32837

Title VP
Name LOZANO, HECTOR F
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title SECRETARY
Name RAMIREZ, MARCELA
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title OTHER
Name CASTANO, RAUL
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title OTHER
Name CARRIZOSA, JAIME
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title OTHER
Name MILLER, JAVIER
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title OTHER
Name LOPEZ DE ARCO, JAVIER
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title TREASURER
Name ESCANDON, JUAN C
Address 15502 STONEYBROOK WEST PKWY
 STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: HECTOR LOZANO

VP

04/09/2017

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title OTHER
Name ORREGO, JOHN
Address 15502 STONEYBROOK WEST PKWY
STE #104 PMB 229
City-State-Zip: WINTER GARDEN FL 34787

Title OTHER
Name MELENDEZ, MARTHA
Address 15502 STONEYBROOK WEST
City-State-Zip: WINTER GARDEN FL 34787